Developments

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A New Focus on Alcohol

Cunning, baffling and powerful. So the Big Book of Alcoholics Anonymous describes alcohol.

It is a baffling drug partly because it is everywhere. Its ubiquity lulls us into forgetfulness. Both addiction agencies and governments seem almost to have forgotten alcohol for several years, while the media drew our attention to the drug of the moment, whether heroin, crack cocaine, ecstasy or crystal methamphetamine. While most of these have been very dangerous drugs, alcohol is the one named as a drug of concern by more than half of AADAC clients. It is the one most used by youth: among Alberta students in grades 7 to 12 surveyed in 2002, 56.3% reported drinking in the previous year.

Provincially, nationally and internationally, we seem to have recently re-awoken to the fact that this is a powerful drug. In the *World Health Report 2002*, the World Health Organization (WHO) estimated that in 2000 alcohol and tobacco shared an almost equal responsibility in the global burden of disease (causing about 4% each), with alcohol causing 3.2% of global deaths. By comparison, illicit drugs caused 0.8% of the burden of disease in the same year.

The WHO's *Global Status Report: Alcohol Policy* (2004) and *Global Status Report on Alcohol 2004* followed. In May 2005, the 58th World Health Assembly recognized "that harmful drinking is among the foremost underlying causes of disease, injury, violence, . . . disability, social problems and premature deaths, is associated with mental ill-health, has a serious impact on human welfare . . . and contributes to social and health inequalities." At the 60th World Health Assembly in 2007, the Director-General of the WHO will present recommendations for reducing alcohol-related harm and report on public health problems caused by harmful use of alcohol.

In Canada, alcohol was identified as a priority of the *National Framework for Action to Reduce the Harms Associated with Alcohol and Other Drugs and Substances in Canada*, released in the fall of 2005. In March 2006, the Canadian Centre on Substance Abuse (CCSA) released *The Costs of Substance Abuse in Canada 2002*. A National Alcohol Strategy is currently in the works, with the participation (among others) of AADAC and other provincial organizations, Health Canada and CCSA.

Provincially, the 2005 *Alberta Drug Strategy* notes the many consequences of alcohol use and names the use and abuse of alcohol as one of six areas requiring action at the community level. And in August of 2006 a new report about violence related to drinking establishments was released.

The *Alberta Roundtable on Violence in and Around Licensed Premises* outlines the results of discussions sponsored by the Alberta Ministry of Gaming in partnership with Alberta Solicitor

General and Public Security and featuring staff of various provincial and municipal government agencies; addictions counsellors; legislative, regulatory and law enforcement staff; and representatives of the hospitality industry. After a review by various ministries, we can anticipate recommendations for further research or action on the subject.

Alcohol seems a cunning drug because it can also improve both social and physical well-being. Yet it is true that most drugs, however dangerous, can confer benefits when used in particular careful ways. In this way, alcohol is similar to heroin, cocaine, amphetamines and benzodiazepines. It is also like these drugs because its misuse can lead to horrendous consequences, and there are many more ways to misuse it than to use it well and beneficially. It makes sense, then, to emphasize the hazards rather than the rewards of use.

This issue of *Developments* discusses both benefits and risks of alcohol use, but openly emphasizes the risks. That is, after all, the business we are in: helping those who cannot use substances in specific, moderate and careful ways. We report on the costs of alcohol use to society as revealed by the recent CCSA report. And, in the context of the new focus on alcohol, we interview the refreshingly plain-spoken Leonard Blumenthal, head of Alcoholics Anonymous for Canada and the United States.

Alcohol: Health Benefits and Risks

According to the World Health Organization (WHO), alcohol is responsible for the premature deaths worldwide of approximately 1.8 million people every year. In Canada, around 9,000 people die each year from alcohol-related causes.

On the other hand, researchers have determined that drinking moderate amounts of alcohol actually *increases* the life expectancies of certain groups of people. Typically, they are over 40 years of age, and the benefits are due to decreased risk of cardiovascular problems.

Although the health benefits are limited and apply to only some people and some consumption patterns, they have been widely publicized. Balancing alcohol's health benefits against its costs to society is more complex than brief articles in popular media reports can convey.

Harmful effects of alcohol on health

The WHO says that "most health professionals agree that alcohol affects practically every organ in the human body." Alcohol use is associated with more than 60 disease conditions.

Alcohol can directly damage the heart, stomach and liver. It directly harms the brain and causes nerve damage. It also contributes to many different forms of cancer (breast, stomach, pancreas, colon, rectum, prostate, salivary gland, ovaries, endometrium, bladder, lip, tongue, throat and liver). Generally, the higher the volume of alcohol drunk, the worse the outcome of such cancers.

When pregnant women drink any amount of alcohol, the fetus may suffer damage to the brain and other systems. This is called fetal alcohol spectrum disorder.

Alcohol use increases the risk of pancreatitis, hemorrhagic stroke and some types of heart problems. Worldwide, it causes an estimated 20% to 30% of esophageal cancer, liver cancer,

cirrhosis of the liver and epilepsy. It is estimated to cause a similar proportion of homicides and motor vehicle accidents.

Those who become dependent on alcohol often neglect their physical health, and suffer nutritional problems and problems related to poor hygiene, exposure, and other features of an unstable way of life. One well-known consequence of alcohol dependence is Wernicke-Korsakoff syndrome: the syndrome leads to problems with the brain and eyes that are actually caused by a deficiency in vitamin B1. The disorder leads to confusion, poor physical co-ordination, eye movement problems, and learning and memory problems.

The leading causes of alcohol-related morbidity in Canada are alcohol dependence followed by non-dependent alcohol abuse, alcoholic psychosis and liver cirrhosis. In 2001/2002 there were 7,353 alcohol-related hospital separations from acute care and psychiatric facilities in Alberta. This included separations for patients diagnosed with alcoholic psychosis, alcohol dependence and abuse, toxic effects of alcohol use, and cirrhosis and other liver damage.

Health benefits of alcohol use

Low to moderate levels of drinking seem to protect against one type of heart disease (coronary heart disease or CHD) and one type of stroke (ischemic stroke). With CHD, the protection is offered mostly by low rates of use, such as a drink every second day, and the protection increases for people who drink with meals. Irregular heavy drinking increases the risk of CHD, even when the volume of alcohol consumed over time averages out to the same as that of the regular, low-level drinker.

Low to moderate alcohol use also protects against peripheral arterial disease, Type 2 diabetes mellitus and gallstones. There is some evidence that moderate consumption may reduce the risk of dementia and Alzheimer's disease. Alcohol may also reduce the risk of rheumatoid arthritis, kidney stones, infections and the common cold. Increased bone mineral density has also been associated with moderate alcohol consumption.

Harmful consequences of moderate alcohol consumption

As a society, we tend to be complacent about alcohol use. Many people use it harmlessly. However, the fact that the use of alcohol is so common means that harm from alcohol is common and costly.

Even moderate use can be dangerous for some people. Combining alcohol with medications or other recreational drugs can have grave consequences: alcohol affects the metabolism, efficacy and strength of action of other drugs. Pregnant women who drink any amount risk harming the fetus.

Moderate drinking can also complicate already existing heart and circulatory problems (CHD, congestive heart failure or high blood pressure). It can be harmful for those with diabetes mellitus, gout, osteoporosis, ulcers, some skin conditions, and seizure disorders.

There is the additional risk that moderate drinking can become heavy drinking or alcohol dependence. The WHO estimates there are 76.3 million people with alcohol use disorders throughout the world. Many people are dealing with devastating alcohol-related disorders such as cancers, liver cirrhosis, stomach ulcers and diabetes. They face psychiatric problems and

increased likeliness of accidental injury or death, as well as personal problems such as job loss, marital and family problems, and imprisonment for drunk driving or violence associated with excessive drinking. It is easy to understand why so many researchers and organizations are reluctant to promote drinking as a way of improving health.

Instead, alcohol needs to be understood and regarded as a potent drug. Education about the powerful effects of this drug is needed to prevent and reduce the many premature deaths continuing each year throughout Alberta, Canada and the world.

The Cost of Alcohol Abuse to Society

It is a cost no one likes to think about. What is a human life worth? How many dollars is it worth to a family if their teenaged daughter dies from alcohol poisoning? How much does a child really lose when neglected by a parent who is alcohol dependent? If a person dies in an accident caused by drunk driving, how much does society lose from their absence? The list of losses to family, friends, colleagues and society as a whole could continue endlessly.

While it would be impossible to place a dollar figure on all of the human costs of alcohol abuse, the Canadian Centre on Substance Abuse (CCSA) has conducted an in-depth study of the losses to society in the form of reduced productivity in the workplace, law enforcement, health care and various indirect costs. *The Costs of Substance Abuse in Canada 2002* analyzes data from the year 2002 and follows international guidelines to determine and compare these costs for tobacco, alcohol and illicit drugs to society. It offers a way to visualize the enormity of Canada's substance abuse costs, while providing organizations like AADAC with a guide for prioritizing programs and services. The study was released in March of 2006 and is the first study of its type since 1992.

According to the study, alcohol abuse alone costs Albertans around $1.6 billion and Canadians $14.6 billion annually. Of that, around half is from productivity lost as a result of illness or death, with Albertans spending $854.6 million on lost productivity. Short-term and long-term disability and premature death are the main costs associated with the productivity losses. Health-care services directly related to alcohol abuse were estimated to cost $407 million annually.

Of the $4.4 billion that Albertans spent on substance abuse costs in 2002, alcohol came a close second to tobacco, but ranked first for direct law enforcement costs and indirect costs such as research, prevention and motor vehicle accidents.

The study also revealed the enormous human-life costs associated with alcohol for Canadians. According to the study, "In 2002, a net total of 4,258 deaths were attributed to alcohol, accounting for 1.9% of all deaths in that year." The number of people who actually died from alcohol-related causes was substantially larger, but the researchers calculated this figure after subtracting the number of deaths believed to have been prevented by the protective effects of moderate alcohol consumption.

To establish dollar figures for the lost lives, the researchers first determined how many potential years of work these people would have been able to contribute had they not perished prematurely, and multiplied that number by a dollar amount. Canadians lost 191,136 potential years of life and spent 1,587,054 days of acute care in hospital.

In total, Albertans spent $527 per capita for all of the aforementioned costs associated with alcohol.

These dollar costs are just an indication of the extent of the harm that results from the use and abuse of alcohol. They cannot tell the full story of the individual and societal losses that accompany the financial costs. They do, however, make it clear that measures to prevent harm from substance use are worthy of the efforts and resources they require.

Alcohol Returns to the Spotlight

The preparation of a draft National Alcohol Strategy is one sign that alcohol is back on the agenda. The strategy is the product of a working group that is co-chaired by AADAC, the Canadian Centre on Substance Abuse and Health Canada. It includes up to 30 members representing various non-governmental organizations, provincial and territorial representatives (including addictions agencies), relevant federal departments, researchers and representatives from the alcohol production and hospitality industries.

Ed Sawka, AADAC's director of National Research Co-ordination, says the group came together after recognizing that alcohol had become the "forgotten drug," bumped from the attention of media and the public by more exotic drugs. But agencies that treat people with substance use problems cannot afford to forget alcohol: it is consistently the drug of highest concern for the greatest number of clients. Across Canada, it is the drug that, apart from tobacco, is acknowledged to cause the greatest harm, and in some parts of the world it ranks higher than tobacco as a cause of disability and death. Besides the many and widespread consequences of alcohol dependence, alcohol use leads to death and disability through motor vehicle collisions, suicide, violence, and damage to physical and mental health.

Alcohol is a drug that the Big Book of Alcoholics Anonymous calls "cunning, baffling and powerful," as Leonard Blumenthal quoted recently to *Developments*. Blumenthal is a former long-time chief executive officer of AADAC, a past nominee for the Order of Canada, and current chairman of the General Service Board for Canada-USA for Alcoholics Anonymous.

"Alcohol," says Blumenthal, "is the real gateway drug, not marijuana. Inexperienced drinkers are not used to drinking to begin with. When they drink, they make bad decisions about driving or sexual activity, using another drug or rioting on Whyte."

Blumenthal was referring to the destructive behaviour of crowds leaving bars on Edmonton's Whyte Avenue during the National Hockey League playoffs in the spring of this year. Alcohol is very much in the news, he points out, but it's always in the background. When he spoke to *Developments*, he had just returned from a trip to Germany while preparations were made for the World Cup of soccer. The biggest concern for officials there, he said, was "people drinking too much and being out on the street."

"Look at the name English soccer fans have got," he says. "It all involves alcohol, it's all legal and above board, and everyone assumes it's harmless."

Blumenthal warns against the "dangerous complacency" that parents sometimes exhibit when their children come home drunk: "They're relieved they've only been using alcohol, they haven't been using drugs."

The danger that alcohol poses to youth is evident from admissions to AADAC services under the Protection of Children Abusing Drugs Act (PChAD) that came into effect on July 1, 2006. PChAD allows parents to ask the courts to mandate treatment for children whose use of alcohol or other drugs is likely to cause significant psychological or physical harm to themselves or others. From July 1 to the end of August, 58 youth have been admitted for treatment. Most common amongst drug use reported are alcohol (100%) and marijuana (96%).

Drawing on his considerable experience as an addictions counsellor, Blumenthal says of people recovering from substance abuse, "They'll tell you they were drinking when they started or when they first experimented. People who get into trouble with alcohol often start using other substances with it."

"When there is a drug problem," Blumenthal advises addictions counsellors, "ask if drinking is also present. With young people, no matter what drug a kid is using, counsellors should never stop asking the question, how much drinking is going on at home? What role is alcohol playing in this situation? What drinking goes on among kids' peers?"

Blumenthal emphasizes the damage that alcohol causes that goes beyond the calculated dollar costs: "People missing work, being hung over at work, family disruptions, family arguments, bad decisions being made like gambling and driving, legal problems, health problems eventually. Christmas and New Year's for many families are terrifying times because alcohol use is anticipated. I ask police how many calls on a Saturday night are *not* alcohol related. Some nights there might be none, some there might be one."

Alcohol is always high on the agenda for addictions counsellors and police officers, but it is now also becoming a top priority for policy makers. In the months following the release of the draft National Alcohol Strategy report, AADAC will be working with other stakeholders to develop an Alberta response. The combined efforts of many people concerned about harmful alcohol use can help us reduce the problems it creates and keep alcohol from again becoming the forgotten drug.

The Back Page

AADAC Resources

Medical/Physiological Effects of Alcohol

This comprehensive report deals with the physiological effects of alcohol, discussing the history of alcohol use; absorption, metabolism and excretion of alcohol; and the effects of short-term and long-term use. This report is available for $10 (plus GST, shipping and handling). See below for ordering information.

Beyond the ABCs of Alcohol

This six-page booklet offers a deeper understanding of alcohol than that offered by the ABCs of Alcohol. It discusses the chemical aspects, metabolism, process and effects of alcohol. It also describes aspects of dependence on alcohol, and benefits and problems resulting from use.

Preventing Heavy Episodic Drinking Among Youth and Young Adults: A Literature Review

This concise report looks at binge drinking (or heavy episodic drinking) among youth and young adults, and strategies that have been shown to decrease the prevalence of binge drinking.

Alcohol: The Forgotten Problem (Policy Background Paper)

The purpose of this paper is to present current evidence on the prevalence of alcohol use and misuse, and to identify those strategies and policy options that are effective in reducing alcohol-related harm.

TO ORDER AADAC RESOURCES: For residents of Alberta, small quantities of most AADAC resources are available free of charge through your nearest AADAC office. Within North America, order through our online catalogue, order by regular post, or call toll-free 1-800-280-9616. To order from outside of North America, call 780-427-7319, e-mail us at rdm@aadac.gov.ab.ca, or send orders by regular post. Our postal address is

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For further information, please see our Ordering FAQ.

Conference

National Conference for Drug Treatment Courts

The national conference of the Canadian Association of Drug Treatment Courts will take place October 15–18, 2006 in Edmonton. The theme will be *Building a Community Connection*. For more information or to register, go to the conference website at www.CADTCconference2006.com

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